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RUEHDBU/AMEMBASSY DUSHANBE 0402
RUEHIL/AMEMBASSY ISLAMABAD 1411
RUEHKT/AMEMBASSY KATHMANDU 8951
RUEHMO/AMEMBASSY MOSCOW 0888
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RUEHKO/AMEMBASSY TOKYO 4249
RUEHCI/AMCONSUL CALCUTTA 7853
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RUEHLH/AMCONSUL LAHORE 3405
RUEHBI/AMCONSUL MUMBAI 7210
RUEHPW/AMCONSUL PESHAWAR 4012
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SUBJECT: HINDI BELT MUSLIMS EAGER TO COMBAT POLIO BUT
PROGRESS WILL BE SLOW

REF: NEW DELHI 8243

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¶1. (SBU) Summary: The persistence of polio in Western Uttar Pradesh (UP) has been the subject of considerable media speculation and analysis, with much of the focus on the Muslim community. Poloff and POL FSN traveled to the area December 11-13 to gauge Muslim views on the subject. The near-universal consensus was that Islam has almost nothing to do with the problem, as the community and its leaders (including mualvis) support fully government efforts to eradicate the disease. The problem is poverty, compounded by weak governance. Poverty is endemic in much of West UP and the Muslims, for a variety of reasons, are towards the bottom in social indicators. The poor suffer from lack of education, and a near total absence of basic infrastructure. In addition, UP does not possess adequate infrastructure to administer a comprehensive polio eradication program. Births are not registered, there is little or no record keeping, few health professionals, and inadequate infrastructure to transport and store vaccines. Until significant numbers of people (including Muslims) are lifted out of poverty, it will remain extremely difficult to eradicate polio or carry out any effective program aimed at improving the dismal social indicators in the state. End Summary.

Embassy Participation

¶2. (U) Health and Human Services (HHS) and USAID are supporting India's polio eradication program. HHS's Centers for Disease Control and Prevention (CDC) has detailed four professionals to India for this task.

¶3. (U) Director CDC Dr. Julie Gerberling is in Delhi December 19 to meet GOI officials and multilateral partners. She will urge the GOI to stay focused and redouble its efforts to reach all children to ensure that the polio virus is eradicated from India. She will also state that India's success will be a global success, as India is the world's largest reservoir of polio.

¶4. (U) The GOI's Ministry of Health has organized a round table meeting on December 19 on polio eradication, which will be co-chaired by Health Minister Dr. Anbumani Ramdoss and the CDC Director.

Bellwether Project: Uttar Pradesh

¶5. (SBU) New Delhi's POL and ECON sections will take the economic and political temperature of key states over the next year. Such snapshots will give us a better sense of how local trends affect national politics, and ultimately, US foreign policy goals. Uttar Pradesh (UP) (one of the "bellwether" states) is facing a state election in early 2007. Poloff and POL FSN traveled to Muslim majority areas in the West of the state to the cities of Moradabad, Bareilly, and Rampur December 11-13. This region of UP is one of the few remaining areas of the world where polio eradication

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efforts have failed, and much of the onus has centered on alleged Muslim reluctance to fully embrace the program and its goals. During the visit, Poloff and POL FSN met with a cross-section of Muslims, from influential opinion leaders to ordinary villagers to gauge their thoughts on this issue. We hope these reports will give Washington readers better insight into the vast India outside Delhi's Ring Road and the economic, security and social trends that will determine where India is headed over the long run.

Polio and Muslim Behavior

¶6. (SBU) Much has appeared in the Indian media regarding UP's failure to eradicate polio. The centerpiece of the anti-polio program is a series of oral vaccines administered to infants and young children. Despite protracted efforts to ensure 100 percent coverage in UP, there are populations which remain out of the program and whose children continue to contract the disease. Polio has persisted in Western UP, which is home to a sizable Muslim minority, with some districts having a Muslim majority. Much of the blame for this failure has centered on alleged Muslim antipathy or indifference to polio eradication efforts, with some commentators depicting this as an indicator of Muslim "backwardness" and inability to function in the modern world.

¶7. (SBU) For example, prominent Indian journalists Harish Khare and Sanjay Kapoor wondered to Poloff why Muslims inside India appear reluctant to accept polio vaccine when in India, but quietly accept it when going on the Haj to Saudi Arabia. They pointed out that Saudi Arabia will not accept Indian Muslim pilgrims unless they produce a "polio certificate" that documents that their children have been administered the vaccine. At the behest of the Saudis, pilgrims are even administered polio drops at the Haj terminal at New Delhi International Airport. In their view, the persistence of polio among Muslims in UP reflects an "active disinformation" campaign carried out by the most conservative elements of

Muslim society. The essential elements, they alleged, are a whispering campaign aimed at illiterate rural Muslims. Rumors circulate that the anti-polio campaign is actually a family planning program sponsored by the GOI to curtail the Muslim population. The rumor purportedly asserts that the two drops of oral vaccine administered to Muslim children will only allow that child to have two offspring.

Moradabad - Poverty is the Problem

18. (SBU) In Moradabad, Mohammad Akram Shamsi, a prominent businessman, and community leader, maintained that this problem had nothing to do with Islam or Muslim cultural attitudes and everything to do with lack of education, stating that "only uneducated people are resisting." To back up his assertion, he pointed out that the Mayor of Moradabad, himself a Muslim, has joined hands with the entire Muslim leadership of the city to support the vaccine administration

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drive. He also asserted that the city's maulvis are fully supportive and that the city leadership has documented 100 percent compliance. The problem, however, is in more remote villages, where resistance is sometimes encountered.

19. (SBU) Shamsi also asserted that, since polio in West UP has proven more resistant to vaccine, the government should establish a "first class lab" in Moradabad to develop vaccine better suited to the population. Shamsi said that the lifestyle of West UP's poor, regardless of religion, also contributed to the prevalence of the disease, as they live with an almost total lack of sanitation, and often consume tainted food. Muslims are principally affected as they are predominantly meat-eaters and eat meat that has not been fully cooked. One problem, he noted, involved media coverage of polio programs. Illiterate people are often ignorant of cause and effect, and all it takes is one instance of a child dying or coming down with a serious illness after consuming the vaccine, for villagers to conclude that it is dangerous. Shamsi urged governments to establish a comprehensive education program aimed at inculcating sanitation and proper hygiene practices to the poor. Another problem, he noted, is the lack of infrastructure in this poorly developed region. Without proper refrigeration, it is very difficult to transport live vaccines. He predicted that with overall economic development would come a rise in literacy and an increase in sanitation that would eventually conquer polio.

Bareilly - Muslims Mobilize

10. (SBU) In Bareilly, Lt. Javed Khalid heads the National Cadet Corps (NCC) program at Islamia Inter College, the largest Muslim educational institution in the region. He described the NCC's effort to contribute to an all-out Muslim program to eradicate polio in Bareilly and the surrounding area. According to Khalid, the NCC has targeted specific Muslim villages and neighborhoods. Provided with vaccine, the cadets distribute flyers several weeks in advance notifying residents of the program. On the appointed day, always a Sunday when workers have a day off and families are more likely to be home, the cadets go house to house administering the polio drops and providing sweets to the children. Khalid maintained that no family in urban Bareilly has resisted or refused the drops. However, in surrounding villages, there was some initial resistance, with some families expressing fear that the drops were dangerous. Khalid was adamant that with the help of local Maulvis and a vigorous advertising campaign featuring the much-admired Hindi film star Amitabh Bachan, villagers have been convinced to accept the vaccine.

Bareilly - Government Efforts Inadequate

¶11. (SBU) Dr. SP Goyal was, until recently, the Chief Medical Officer in Bareilly and administered the anti-polio effort there. Dr. Goyal asserted to Poloff that the government of UP was simply not up to the task of running a

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successful program. He pointed out that there were 17 documented cases of polio in Bareilly, but that 15 had run their course with no ill-effects on the children. This was, he noted, because the children had been administered polio vaccine as infants, which was enough to "abort the symptoms" before they became crippling. Dr. Goyal pointed out that for a child to be fully immunized against Polio, he must take five separate doses of the vaccine starting at the age of six weeks. He asserted that only 15 to 20 percent of the area's children had been administered all five required doses, and blamed this on the lack of government follow-up.

¶12. (SBU) Dr. Goyal pointed out that the government of UP had so far failed to put in place a mandatory birth registration process, and that without it, it is almost impossible to have an effective childhood immunization program. This is compounded by an almost total lack of adequate medical infrastructure, including a serious shortage of health professionals capable of administering an effective anti-polio campaign. Dr. Goyal pointed out that there are four million persons residing in the Bareilly area and only 400 government health professionals. He maintained that UP is facing a shortage of 3,000-4,000 qualified medical personnel. Dr. Goyal also noted that there is not effective record keeping and not even one vehicle to allow government doctors to visit remote villages to monitor programs. Dr. Goyal pointed out that this is compounded by the fact that Western UP is an "endemic zone" for polio, and that persons in the region have more resistance to common vaccines.

UP's Weak-Failing Health Care

¶13. (SBU) HHS/CDC staff who have visited the polio affected areas of UP have been told by community leaders that there is a complete absence of health care in poor, Muslim dominated localities. This absence of government supported programs for other diseases is the leading cause of the persistence and spread of infectious disease in these regions. Because of the lack of health care programs, poor, uneducated citizens of UP are doubtful of the significance of the much-touted polio eradication campaign.

Comment - Need to Get Beyond Stereotypes

¶14. (SBU) Indian media has been quick to assert that Islam and Muslims are behind the lack of progress in eradicating polio in West UP. This is indicative of the often shallow and stereotypical reporting one sees regarding Muslims in India. One does not have to travel far from Delhi and into the countryside to see poverty on a massive scale and it is this poverty that is making it so difficult to eradicate polio. Muslims, for a variety of reasons, are predominantly poor in UP, and the problems associated with poverty are found in abundance among them as clearly documented in the recently-released Sachar report (Reftel). Poor infrastructure, lack of sanitation, lack of hygiene, lack of education, lack of medical care, all but guarantee the

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persistence of the disease. This is compounded by the deep-rooted governance problems that plague the state. A poorly performing government bureaucracy is incapable of delivering basic health services to the overwhelmingly poor population of the region. Poverty is pervasive in rural UP and without significant progress in lifting the population out of its depths, any social programs, whether they involve

health, education, female empowerment, or provision of basic infrastructure will make little progress. These economic and political factors will all but ensure that it will take a long time to totally eradicate polio. Although most interlocutors were convinced that polio would eventually disappear, they advised lots and lots of patience.

¶15. (U) Visit New Delhi's Classified Website:
(<http://www.state.sgov.gov/p/sa/newdelhi/>)
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